OAHU CANDIDATES-SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT CANDIDATE COMMITTEE



PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.") SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: SECTION II-TYPE OF REPORT: (a) Candidate Name: (See the Schedule of Reporting Dates to complete this section) BRIAN SCHATZ Amended First Third Second Fourth 1st Preliminary Primary (b) Committee Name: FRIENDS OF BRIAN CCHATZ 2nd Preliminary Primary UFT should Edge 1 P.4:104 (c) Mailing Address: P.O. BOX 99 **Final Primary** HONOLULU, HI 96810 Preliminary General REPORTING PERIOD (d) Phone (Bus) 534-6621 Final Election Period through DEC. 31, 2003 Supplemental SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section) **COLUMN A** COLUMN B ELECTION PERIOD² **TOTAL THIS PERIOD** TOTAL TO DATE Cash on Hand at the Beginning of the Election Period. 10,727.54 Cash on Hand at the Beginning of this Reporting Period..... 2. 9,101-25 Total Receipts (From Line 15)..... 300.00 26,042.75 Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)............. 36,770.29 9,401.25 Total Disbursements (not including Unpaid Expenditures) (From Line 19)..... 28,584.24 1,215.20 6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... 8,184.05 Total Loans at the Closing of this Reporting Period..... 1,000-00 Total Unpaid Expenditures at the Closing of this Reporting Period..... Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)..... 1,000.00 10. Surplus/Deficit (Subtract Line 9 from Line 6)..... 7,186.05 I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Date

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section II, section III of this Disclosure Report.

An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if



RECEIPTS

COLUMN A

COLUMN B ELECTION PERIOD TOTAL TO DATE

	TOTAL THIS PERIOD	TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less	100.00	12 925 56	11 (a) (i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100	***************************************	12, 830.00	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(ii) and 11(a)(iii))	***************************************	13,212.75	11(a)(iii)
(b) Candidate or Candidate's Immediate Family		26,042.75	11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less			[14(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100		0	T 1 (b) (iii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii))	. 0	0	11(6)(4)
2. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)	300.00	26,042.75	12
3. Public Funds and Other Receipts	L	0	13
4. Loans	0	0	14
5. Total Receipts (Add Lines 12 through 14).	300.00	26,042.75	15
SBURSEMENTS			
Expenditures			16
. Loans Repaid or Forgiven	. 24.39	4,000.00	
. Unpaid Expenditures Paid or Forgiven	0		17
. Subtotal Disbursements (Add Lines 16 through 18)	1,190.81	1,190.81	18
Unpaid Expenditures	1,215.20	78,584.24	19
Total Disbursements (Add Lines 19 and 20)	0		20
	1,215.20	28,584.24	21

CHECK ONLY ONE BOX USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY	BELOW
HOWDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES	

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

FRIEN	ND CANDIDATE COMMITTEE NAME: VDS OF BRIAN SCHATZ	PAGE		DF
DATE OF DEPOSIT OR RECEIPT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE	ne l
CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	OF NON-MONETAR CONTRIBUTION THIS PERIOD	Y AGGREGATE ELECTION PERIO TOTAL TO DATE
1/5/02	NON-MONETARY CONTRIBUTION CYNTHIA ALM 146 WATOKANAKA PLACE HONDLULU, HI 96817		200.00	
1/9/02	NON-MONETARY CONTRIBUTION WENDELL + RAE LEE 94-1014 KUKULA STREET WAIPAHU, HI 96797		100.00	100.00
	NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION			
	☐ NON-MONETARY CONTRIBUTION			
	NON-MONETARY CONTRIBUTION			
LIPTOTAL OF	MONETARY AND NON-MONETARY CONTRIBUTIONS THIS			
	ON HUSE I DEVY ARITA RICHARD LECASETTA DAY DOCUMENTAL CONTROL OF THE PARTY OF THE P		300.00	**************************************

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

	IDS OF BRIAN (SCHATZ	PAGE / O	F
DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
11/1/02	NEXTEL	PHONE	24.39
	NON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		-
	EXPENDITURES THIS PERIOD (This Page)		24.39
TOTAL EXPEN	DITURES THIS PERIOD (Last Page Only) (Transfer total to Line Numb	er 16 of the Disclosure Report)	24.39 24.39

Form CC-5(B) (Rev. 5/99)

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE E UNPAID EXPENDITURES CANDIDATE COMMITTEE

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE. CANDIDATE AND CANDIDATE COMMITTEE NAME: PAGE FRIENDS OF BRIAN SCHATZ FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR DATE OF UNPAID EXPENDITURE AMOUNT OF UNPAID NEW UNPAID AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF EXPENDITURE AMOUNT PAID EXPENDITURE AT AMOUNT OR FORGIVEN THIS PERIOD CLOSING OF PURPOSE OF UNPAID EXPENDITURE THIS PERIOD THIS PERIOD FORGIVEN INVOICED DUE DATE PAST REPORTING PERIOD DATE \$1,190.81 11/12/02 \$1,190.81 0 FORGIVEN FORGIVEN FORGIVEN FORGIVEN 1. SUBTOTAL (This Page)..... 2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report)..... 3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report)..... 4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.

Form CC-5(E) (Rev. 5/99)